DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

REPLACEABLE LED BULB WITH INTERCHAGEABLE LENS OPTIC

identified as attorney docket number 01-1-439, the specification of which [X] is attached hereto. [] was filed on as Appln. Serial No and was amended on (if applicable).
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.
I acknowledge the duty to disclose information which is material to the examination of this application in accordance with title 37, Code of Federal Regulations, Section 1.56(a).
I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:
William E. Meyer - Reg. No. 30,719 OSRAM SYLVANIA Inc. 100 Endicott Street, Danvers, MA 01923
Address all telephone calls to (978) 750-2384.
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.
FULL NAME OF INVENTOR, Charles M. Coushaine Inventor's Signature Railes M. Coushaine Date 9/10/01
Residence 56 Birch Drive, Rindge, NH 03461
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